

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT INSPECTION REPORT FOR CLASS III INJECTION WELLS

WELL IDENTIFICATION

Type of Inspection:					Announced		Unannounced	
Date of Ins		Time of Inspection (24 hour):						
Well Nos.:		Permit Nos.:						
1/4 1.	/4 1/4	Section	Township		South	Range	W	County
Company:								
INSPECTION INFORMATION								
Maximum Injection Pressure Allowed by Permit:								
Injection Pressure Gauged at:			Wellhead	P	lant	Valve House		Pumphouse
Describe where flow rate meters are located:								
Well No.	With. Pressure	Pressure Rate		FIO	Inj. Rate		Condition of Well, Associated Piping, Emergency Containment MENTS	
PERSONNEL MET DURING INSPECTION Name: Title:								

Title

Date

Signature of Inspector